MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/594850

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1								51						
2								52						
3								53						
4								54						
5								55						
6								56						
7								57						
8								58						
9								59						
10								60						
11								61						
12								62						
13								63						
14								64						
15								65						
16								66						
17								67						
18								68						
19								69						
20								70						
21								71						
22								72						
23								73						
24								74						
25								75						
26								76						
27								77						
28								78						
29								79						
30								80						
31								81						
32								82						
33								83						
34								84						
35								85						
36								86						
37								87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.		⬇		⬇		⬇		TOTAL IND.		⬇		⬇		⬇
TOTAL DEP.		⬅		⬅		⬅		TOTAL DEP.		⬅		⬅		⬅
TOTAL CLAIMS								TOTAL CLAIMS						

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/594850

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT			AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101							151						
102							152						
103							153						
104							154						
105							155						
106							156						
107							157						
108							158						
109							159						
110							160						
111							161						
112							162						
113							163						
114							164						
115							165						
116							166						
117							167						
118							168						
119							169						
120							170						
121							171						
122							172						
123							173						
124							174						
125							175						
126							176						
127							177						
128							178						
129							179						
130							180						
131							181						
132							182						
133							183						
134							184						
135							185						
136							186						
137							187						
138							188						
139							189						
140							190						
141							191						
142							192						
143							193						
144							194						
145							195						
146							196						
147							197						
148							198						
149							199						
150							200						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT			AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
201							251						
202							252						
203							253						
204							254						
205							255						
206							256						
207							257						
208							258						
209							259						
210							260						
211							261						
212							262						
213							263						
214							264						
215							265						
216							266						
217							267						
218							268						
219							269						
220							270						
221							271						
222							272						
223							273						
224							274						
225							275						
226							276						
227							277						
228							278						
229							279						
230							280						
231							281						
232							282						
233							283						
234							284						
235							285						
236							286						
237							287						
238							288						
239							289						
240							290						
241							291						
242							292						
243							293						
245							294						
245							295						
246							296						
247							297						
248							298						
249							299						
250							300						
TOTAL IND.		↓		↓		↓	TOTAL IND.	21	↓		↓		↓
TOTAL DEP.		←		←		←	TOTAL DEP.	19	←		←		←
TOTAL CLAIMS							TOTAL CLAIMS	21					